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TO:	PHONE #:	FAX #:
United States Patent and Trademark Office Mail Stop Amendment Examiner C. Delacroix-Muirhead Art Unit: 1614		571-273-8300

From : Stephen E. Reiter *SCR*
 Email Address : sreiter@foley.com
 Sender's Direct Dial : 858.847.6711
 Date : December 8, 2005
 Client/Matter No : (ABI1550-1) 071243-1404
 User ID No : 1877

MESSAGE:

Re: US Patent Application No. 09/937,840
 Our Ref.: (ABI1550-1) 071243-1404

Attached please find:

- Transmittal (3 pgs.); *Duplicate Copy Attached*
- Response (15 pgs.);

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		Vanessa E. Agha

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Atty. Dkt. No. ABI1550-1 (071243-1404)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Applicant: Soon-Shiong and Desai

Title: LONG TERM
ADMINISTRATION OF
PHARMACOLOGICALLY
ACTIVE AGENTS

Appl. No.: 09/937,840

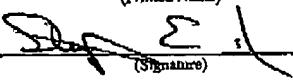
Filing Date: 1/28/2002

Examiner: C. Delacroix-Muirhead

Art Unit: 1614

CERTIFICATE OF FACSIMILE TRANSMISSION
I hereby certify that this paper is being facsimile transmitted to the
United States Patent and Trademark Office, Alexandria, Virginia
on the date below.

Stephen E. Reiter
(Printed Name)


(Signature)

December 8, 2005
(Date of Deposit)

DEC 08 2005

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.

Assertion of Small Entity status is enclosed.

The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	46	-	21	= 25	x \$50.00 = \$1250.00
Independent Claims:	4	-	5	= 0	x \$200.00 = \$0.00

DLMR_278371.1

-1-

Atty. Dkt. No. ABI1550-1 (071243-1404)

First presentation of any Multiple Dependent Claims: +	\$360.00	=	\$0.00	
		CLAIMS FEE TOTAL	=	\$1250.00

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[] Extension for response filed within the first month:	\$120.00	\$0.00
[] Extension for response filed within the second month:	\$450.00	\$0.00
[X] Extension for response filed within the third month:	\$1,020.00	\$1,020.00
[] Extension for response filed within the fourth month:	\$1,590.00	\$0.00
[] Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:		\$1,020.00
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$2,270.00
[] Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		\$2,270.00

[X] Please charge Deposit Account No. 50-0872 in the amount of \$2,270.00. A duplicate copy of this transmittal is enclosed.

[] A check in the amount of \$2,270.00 is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such

Atty. Dkt. No. ABI1550-1 (071243-1404)

extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to
Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address
indicated below.

Respectfully submitted,

Date 12/8/05

By Steph E. Reiter

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